Workplace Hazards and Solutions Worksheet

Date: Company: Work area: Evaluator:

| Hazard Source (Object, Activity, or Location | on) | |
|---|---|---|
| Hazards (How can someone get hurt?) | | |
| Caught in or between (machinery, soil, etc.) Chemical or substance (blood, dust, etc.) Electrical Falls (from elevation or at same level) | Fire or explosion Hit by or against (vehicle, debris,etc.) Hot environment or surface Noise | Slip or Trip Sprain or Strain (lifting, etc.) Other Other |
| Describe each hazard: | | |
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| Hazard Solutions (What can change to m | ake it safer?) | |
| Change what's used (safer chemical, material, or equipment, etc.) | Change how work's done (safer method or tool, etc.) | Change something about the location (improve ventilation, limit access, etc.) |
| Describe the changes (hazard solutions) for each haza | | , |
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| Personal Protective Equipment (PPE) Eye Face Fall Protection Foo | ot Hands Head Hearing | Torso Respirator Other |
| | ot Hands Head Hearing | Torso Respirator Other |
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| Hazard Solutions (What can change to make it safe | er?) | |
| Change what's used (safer chemical, material, or Change what (safer chemical, material, or Change what (safer chemical, material, material, or Change what (safer chemical, material, mat | ange howwork's done (safer method | Change something about the location (improve |
| Change what's used (safer chemical, material, or equipment, etc.) | <u></u> | Change something about the location (improve ventilation, limit access, etc.) |
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| Change what's used (safer chemical, material, or equipment, etc.) Describe the changes (hazard solutions) for each hazard: Personal Protective Equipment (PPE) | ange howwork's done (safer method ool, etc.) | ventilation,limitaccess,etc.) |
| Change what's used (safer chemical, material, or equipment, etc.) or to Describe the changes (hazard solutions) for each hazard: Personal Protective Equipment (PPE) Eye Face Fall Protection Foot Hazard | ange howwork's done (safer method ool, etc.) | ventilation,limitaccess,etc.) |